10 Key Steps to Implementing an HIV Testing Program:

Successful Program Management and Quality Assurance

1. One Person Is In Charge

- One staff person should manage the testing program; she/he may or may not manage testing QA.
- One staff person (plus a back-up, if possible) should coordinate testing QA.
- Testing QA requires ongoing processes to ensure testing protocols are being followed.

2. Develop Protocol(s) Before Startup

Decide whether to implement laboratory-based or point-of-contact testing.

Once you've decided, select which testing product best suits your agency needs.

3. Find Your Testing Program Partners

- Confirm a relationship with a laboratory to process your confirmatory specimens.
- Confirm agreements with HIV clinics for linkage to care for new positives. Consider linkages for high-risk negatives.
- Assign responsibility for reporting HIV positive results to your state health department in accordance with law/policy.

4. Train Testing Staff and Their Supervisors

- All staff members (reception, etc.) should be included in a general orientation to your testing program.
- Train and update testers and supervisors. Add more training based on performance and on staff turnover. Standard operating procedures (SOPs) help assure that everyone adheres to the protocol.
- Key skillsets: pre-test discussion, consent, specimen collection and processing, giving test results, documentation, and linkage to care.

5. Assign Staff to Specific Steps

- Who will actually counsel, test and process specimens?
- Who will give negative, preliminary and/or confirmed positive test results?
- Who will advise/consult on medical issues?

6. Ensure Internal Documentation

- Accurate documentation is key for quality program management.
- Internal documentation includes record-keeping for supply inventory, shelf life, storage temperature log, testing and results, confirmatory specimens, linkage to care, and HIPAA.
- Confidentiality of test results is crucial or you will lose the trust of your patients/clients.

7. Practice Universal Precautions

- Standard Precautions policy in HIV testing is no different than in any other situation involving blood and body fluids.
- Adopt an agency needlestick policy that includes post-exposure prophylaxis (PEP) for potential exposure to HIV, and train all testing staff.

8. Assure Patient Education

- Consider culture and reading level when selecting materials. Assure that all materials have consistent messages.
- Provide counselors with discussion checklists to assure consistency.
- FDA requires that patients be given product information pamphlets if HIV testing is done following a point-of-care protocol.

9. Assure Linkage to Care

- Confirm formal agreements with HIV treatment clinics/agencies that will accept your referrals of newly-diagnosed patients. Don't begin testing until linkages are in place!
- Give patients with a confirmed HIV diagnosis clear direction on "what happens next."
- Follow up on patients. Linkage to care is a component of testing QA.

10. Start Up in Steps

- Run a pilot (limited by time period, location, shift, etc.) to uncover gaps in your testing program.
- Change your HIV testing protocol and re-train staff as needed, based on the pilot and/or your ongoing quality assurance monitoring.



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